



# State of New Hampshire

## 2014 ANNUAL REPORT

The following information shall be given as of January 1  
preceeding the due date Pursuant to RSA 304-C:80.

REPORT DUE BY April 1, 2014

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE  
WILL BE ASSESSED A LATE FEE.

Filed  
Date Filed: 06/06/2014  
Business ID: 695456  
William M. Gardner  
Secretary of State

Twin State Property Maintenance & Development LLC

142 Moreways Park  
Charlestown, NH 03603

### ADDRESS OF PRINCIPAL OFFICE:

142 Moreways Park  
Charlestown, NH 03603

### REGISTERED AGENT AND OFFICE:

Sargent, Frank, Jr.  
142 Moreways Park  
Charlestown, NH 03603

ENTITY TYPE: LLC

BUSINESS ID: 695456

STATE OF DOMICILE: NEW HAMPSHIRE

General contracting construction

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

☐ The new mailing address

☐ The new principal office address

PO Box is acceptable.

### MANAGERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

LIST AT LEAST ONE MANAGER BELOW OR MEMBER ON RIGHT

NAME Frank Sargent Jr  
STREET 142 Moreways Park  
CITY/STATE/ZIP Charlestown NH 03603  
NAME Thomas P Harrington  
STREET #2 Garden Way S  
CITY/STATE/ZIP Ascutney VT 05030  
NAME  
STREET  
CITY/STATE/ZIP  
NAME  
STREET  
CITY/STATE/ZIP

### MEMBERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

MUST LIST AT LEAST ONE MEMBER BELOW IF NO MANAGERS

NAME Frank Sargent Jr  
STREET 142 Moreways Park  
CITY/STATE/ZIP Charlestown NH 03603  
NAME Thomas P Harrington  
STREET #2 Garden Way S  
CITY/STATE/ZIP Ascutney VT 05030  
NAME  
STREET  
CITY/STATE/ZIP  
NAME  
STREET  
CITY/STATE/ZIP

NAMES AND ADDRESSES OF ADDITIONAL MANAGERS/MEMBERS ARE ATTACHED

To be signed by the manager, if no manager, must be signed by a member.

I, the undersigned, do hereby certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here:

Please print name and title of signer:

NAME

TITLE

FEE DUE: \$150.00

E-MAIL ADDRESS (OPTIONAL): Frankies1968@gmail.com

State of New Hampshire  
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WHEN THIS FORM  
PUBLIC DOCUMENT  
REQUIRED INFORMATION

WILL BECOME A  
PUBLIC DISCLOSURE  
IT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE

RETURN COMPLETED REPORT AND PAYMENT TO:

New Hampshire Department of State, Annual Reports, 107 N. Main St., Room 204, Concord, NH 03301